PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

_												10.195
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		1	TYPE [OR	SMALL	ENTITY
			<i>UU</i>					RATE	FEE	1	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	ÖR	BASIC FEE	770.00
T	OTAL CHARGE	ABLE CLAIMS	40 min	nus 20=	· 70			XS 9=	180	OR	X\$18=	
IN	DEPENDENT C	CLAIMS	ろm	inus 3 =	•			X43=		OR	X86=	
M	ULTIPLE DEPE	NDENT CLAIM P		1/4	26			+145=		1	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	2000	OR		,
٠.			TOTAL	368	OR	TOTAL	711001					
		CLAIMS AS A (Column 1)		(Colum		(Column 3)	_	SMALL	ENTITY	OR	OTHER SMALL	
4		CLAIMS REMAINING		HIGHE			ΙΓ		ADDI-	1 1		ADDI-
AMENDMĘNT A		AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. 40	Minus	. y	0	= Ø		X\$ 9=		OR	X\$18=	
AME	Independent	$\overline{}$		***3	C) AIAA	= Ø		X43=		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	·
							L	TOTAL			TOTAL	
		Α	DDIT. FEE		OR ,	ADDIT. FEE						
	_	(Column 1)		(Colum		(Column 3)						
8		REMAINING		NUMB		PRESENT	l		ADDI-	·		ADDI-
N		AFTER		PREVIO	USLY	EXTRA		RATE	TIONAL		RATE	TIONAL
ΜE		AMENDMENT		PAID F	OR		l ⊩		FEE			FEE
AMENDMENT	Total Independent	•	Minus Minus	**	÷	a	$ \cdot $	X\$ 9=		OR	X\$18=	<u>.</u>
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	THOTFILDE	THE PERSON OF MICE	Lifte DEP	FIADEM (.			▎▐	1105				
								+145=		OR	+290≈	
	·							TOTAL DOIT, FEE		OR ,	TOTAL UDDIT. FEE	
		(Column 1)		(Colum	n [.] 2)	(Columa 3)		·	: 		:	
U	\	CLAIMS	. 1	HIGHE	ST			- · · · · · · · · · · · · · · · · · · ·	ADDI			<u> </u>
		REMAINING AFTER	ļ	PREVIOU		PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
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AMENDMENT	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
Ĭ.	Independent		Minus	***		= 1		X43=		ŀ	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	^		OR	∨ 003	
								+145=	· .	OR	+290=	. [
• H	the entry in colum	nn 1 is less than the	entry in colum	n 2, write 1	O" in colu	mn 3.	_	TOTAL		.	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
1	ne mignest Num	per Previously Pald	For (Total or	independen	t) is the l	nighest number	found	in the appr	opriate box	in colu	ന്ന 1,	1
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